

IDAHO SUPREME COURT
APPLICATION FOR REGISTRATION AS A
CIVIL CASE MEDIATOR
(I.R.C.P. 16(k))
(Other than Child Custody and Visitation Disputes)

GENERAL INFORMATION

1. Mediator Registration: Qualifications of Court Appointed Mediators

To be placed on the Supreme Court's list of civil case mediators, the mediator must be a member of the Idaho State Bar who has been admitted to the practice of law for not less than five (5) years. In addition, the mediator must have attended a minimum of forty (40) contact hours of mediation training that meets the standards set forth in Rule 16(j)(6)(b)(iv), Idaho Rules of Civil Procedure.

2. Supporting Documentation

An applicant must submit the following to be placed on a list of mediators maintained by the Supreme Court:

- A. The attached application;
- B. An affidavit of compliance executed by the applicant attesting that the applicant has fulfilled the requirements for registration;
- C. A copy of the applicant's current Idaho State Bar license; and
- D. A certificate of completion or other document showing that the applicant's mediation training has been approved by an accredited college or university, the Idaho State Bar, the Idaho Mediation Association, or the Society of Professionals in Dispute Resolution.

3. To Remain on the Supreme Court List

In order for a mediator to remain on the Supreme Court's list of civil case mediators, the mediator must submit proof that the mediator has completed a minimum of twenty (20) contact hours of additional mediation training or education during the preceding two (2) calendar years by completing a program of instruction approved by an accredited college or university or approved by the Idaho State Bar Association, Idaho Mediation Association, or the Society of Professionals in Dispute Resolution. The two calendar year reporting period begins on January 1 of the year the mediator is placed on the list unless the mediator is listed after June 30 in which case the two year reporting period begins on January 1 of the following year.

- 4. Applications should be mailed to the Idaho Supreme Court; c/o Administrative Director of the Courts; P.O. Box 83720; Boise, Idaho 83720-0101; telephone # (208) 334-2246.
- 5. I.R.C.P. 16(k), 40(b), and I.R.E. 507 are attached for reference.
- 6. A list of mediators whose applications have been submitted by August 31, 1996, will be published in September 1996.

**IDAHO SUPREME COURT
451 WEST STATE STREET
P.O. BOX 83720
BOISE, IDAHO 83720-0101
(208) 334-2246**

**APPLICATION FOR REGISTRATION AS A
CIVIL CASE MEDIATOR
(I.R.C.P. 16(k))
(Other than Child Custody and Visitation Disputes)**

NAME _____

Organization _____

Mailing Address _____ Suite _____

City _____ County _____ State _____ ZIP _____

Telephone (____) _____ Extension _____ FAX (____) _____

E-Mail Address _____

The information you furnish above will be used in all correspondence with you and in the directory of mediators.

I herewith apply for registration on the list of court appointed civil case mediators maintained by the Idaho Supreme Court pursuant to Rule 16(k) I.R.C.P.

In support of this application, I state the following:

- I am a member in good standing of the Idaho State Bar.
- I have been admitted to the practice of law for not less than five (5) years.

- I have attended a minimum of forty (40) contact hours of mediation training that complies with the standards set forth in Rule 16(j)(6)(B)(iv), Idaho Rules of Civil Procedure. A description of this training is set forth in the attached Addendum Sheet of Mediator Training.
- I submit the following information for inclusion on the Supreme Court's roster of civil case mediators (other than child custody and visitation disputes). **(Please print or type this information in the space provided below using the attached legend of abbreviations where appropriate.)**

(1) Professional Affiliations: (bar memberships, mediation associations)

(2) Education:

(3) Legal training and experience: (litigation experience, areas of practice, expertise)

(4) Mediation training and experience:

(5) Fees and expenses:

(6) In addition to the county of my mailing address, I am willing to conduct mediations in the following counties:

Signature _____ Date _____

Please return the completed application with supporting documentation to:

Idaho Supreme Court
Administrative Director of the Courts
451 West State Street
P.O. Box 83720
Boise, Idaho 83720-0101

**IDAHO SUPREME COURT
451 WEST STATE STREET
P. O. BOX 83720
BOISE, IDAHO 83720-0101
(208) 334-2246**

**APPLICATION FOR REGISTRATION AS A
CIVIL CASE MEDIATOR
(Other than Child Custody and Visitation Disputes)**

ADDENDUM SHEET OF MEDIATOR TRAINING

(You must use this sheet to list your mediation training sessions.)

NAME _____

MEDIATOR TRAINING:

| <u>Description of Course or Training</u> | <u>Contact Hours</u> | <u>Dates</u> | <u>Name of Entity Listed Below which Sponsored or Approved Training</u> |
|---|---------------------------------|---------------------|--|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(Attach additional pages if needed.)

NOTE: Courses and training sponsored by an accredited college or university do not require further approval. Mediation training sessions conducted by other providers must be approved by the Idaho State Bar, the Idaho Mediation Association, or the Society of Professionals in Dispute Resolution as provided by Rule 16(k) of the Idaho Rules of Civil Procedure.

| | |
|---------------------------|----------------------|
| _____ Signature | _____ Date |
|---------------------------|----------------------|

THE STATE OF IDAHO SUPREME COURT

CERTIFICATE OF COMPLETION OF ADDITIONAL CIVIL CASE MEDIATOR EDUCATION

Reporting period: _____ through _____

To the Supreme Court of the state of Idaho:

I, _____ (Print), hereby certify under penalty of perjury that I have completed a minimum of twenty (20) contact hours of additional mediator education as outlined below, which education has consisted of courses, seminars, or training sessions which have been sponsored or approved by an accredited college or university, the Idaho State Bar, the Idaho Mediation Association, or the Society of Professionals in Dispute Resolution, as required by Rule 16(k) of the Idaho Rules of Civil Procedure, Idaho Supreme Court Rules. (Please attach a certificate of completion or other document showing that the mediation education has been approved by one of the above organizations.)

| Course Title and Principal Trainer(s) | Course Date(s) | Name of Entity Listed Above which Sponsored or Approved Training | Course Location | Actual Training Hours |
|---------------------------------------|----------------|--|-----------------|-----------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| TOTAL | | | | |

(Attach a separate sheet of paper as an addendum to this certificate if additional space is needed.)

Dated this _____ day of _____, 200_____.

Signature

Subscribed and sworn to before me, a Notary Public, this _____ day of _____, 200_____
Notary Public: _____ Residing at: _____
Commission expiration date: _____

IDAHO SUPREME COURT

**APPLICATION FOR REGISTRATION AS A
CIVIL CASE MEDIATOR
(Other than Child Custody and Visitation Disputes)**

AFFIDAVIT OF COMPLIANCE

State of _____)
) ss.
County of _____)

To the Idaho Supreme Court:

I, _____, being first duly sworn, depose
and say that:

I am the applicant who has signed this application for the placement of my name on the list of civil case mediators (other than child custody and visitation disputes) maintained by the Idaho Supreme Court in accordance with Rule 16(k) of the Idaho Rules of Civil Procedure. By signing this application, I certify that I have fulfilled the requirements therein for becoming a registered civil case mediator.

I fully realize that the determination as to whether I am placed on the Supreme Court's list of civil case mediators depends on the truth and completeness of my answers set forth in this application and the statements attached. To my knowledge, the answers and information which I have supplied in connection with the application are true and complete.

I have read and understand the contents of Rule 16(k) of the Idaho Rules of Civil Procedure and Rule 507 of the Idaho Rules of Evidence, as adopted by the Idaho Supreme Court, relating to civil case mediation and mediator privilege, respectively, and I intend to conduct the mediation of civil cases in conformance with those rules.

Date: _____
Applicant's Signature

Subscribed and sworn to before me this ____ day of _____,
200____.

(SEAL)

Notary Public for _____
Residing at _____
My Commission Expires _____

LEGEND OF ABBREVIATIONS

AAA = American Arbitration Association
ABA = American Bar Association
AAHCA = American Academy of Health Care Attorneys
ABTA = American Board of Trial Advocates
ACTL = American College of Trial Lawyers
AELC = American Employment Law Council
AFM = Academy of Family Mediators
CA = Courthouse Alternatives, Inc.
CPM = Certified Professional Mediator
CRCI = Conflict Resolution Center, Inc.
IADC = Idaho Association of Defense Counsel
ILF = Idaho Law Foundation
IMA = Idaho Mediation Association
Inns = Inns of Court
ISB = Idaho State Bar Member
ITLA = Idaho Trial Lawyers Association
IVL = Idaho Volunteer Lawyers
SPIDR = Society for Professionals in Dispute Resolution
USAMI = U.S. Arbitration and Mediation of Idaho, Inc.
U.S.D.C. = United States District Court
U.S.S.Ct. = United States Supreme Court